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FROM William B. Vass

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DATE December 12, 2006

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This is the first page of 20

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## MESSAGE

Re: U.S. Application No. 10/709,298  
Filed: April 27, 2004  
First Named Inventor: SIMPSON, Todd Garrett

Attached: Transmittal Form  
Fee Transmittal  
Credit Card Payment Form  
Petition for Extension of Time  
Reply

DMSTORLegal00083001217435230v1

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PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031  
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**TRANSMITTAL  
FORM**

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number  
10/709,298Filing Date  
April 27, 2004First Named Inventor  
Simpson, Todd GarrettArt Unit  
3625Examiner Name  
Mila AlrapetianRECEIVED  
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Attorney Docket Number  
50319-20**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Bennett Jones LLP, Customer Number 23971		
Signature			
Printed name	William B. Vass, Bennett Jones LLP, Customer No. 23971		
Date	December 12, 2006	Reg. No.	36,416

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	William B. Vass, Regn. No. 36,416	Date	December 12, 2006

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (07-06)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

510.00

## Complete If Known

Application Number

10709,298

Filing Date

April 27, 2004

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First Named Inventor

Simpson, Todd Garrett

Examiner Name

Mila Airapetian

Art Unit

3625

Attorney Docket No.

50319-20

DEC 2 2006

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 02-2057 Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

## Small Entity Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

## Total Claims

## Extra Claims

## Fee (\$)

## Fee Paid (\$)

- 20 or HP = 0 x 0 = 0

## Multiple Dependent Claims

## Fee (\$)

## Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

## Indep. Claims

## Extra Claims

## Fee (\$)

## Fee Paid (\$)

- 3 or HP = 0 x 0 = 0

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 -	/ 50 =	(round up to a whole number)	x	=

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

## Fee Paid (\$)

Other (e.g., late filing surcharge): \_\_\_\_\_

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 36,416	Telephone 416-863-1200
Name (Print/Type)	William B. Vass, Bennett Jones LLP		

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